

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/568,165		Filing Date 09 February, 2006			<input type="checkbox"/> To be Mailed				
				Applicant(s) TONCELLI, DARIO						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 02/09/2006		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep		1					Total Indep						
Total Depend			8				Total Depend						
Total Claims			9				Total Claims						

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